

KENTUCKY UNDERGROUND STORAGE TANK ASSESSMENT WELL FORM**1. Owner Information**

Well Owner's Name: _____

Mailing Address: _____

City: _____

Phone: _____

6. Facility Information

Facility Name: _____

Mailing Address: _____

City: _____

Phone: _____

2. General Well Construction

Start Date : _____

Finish Date: _____

Drilling Method: _____

Surface Elevation: _____

Total Depth of Well: _____

Depth to Bedrock: _____

Depth to Static Water Level: _____

7. Well Construction Sketch

(Attach additional sheet if needed)

3. Well Construction Information

Feet Below Surface		Hole	Casing, Screen or Coupling
From	To	Diameter	Diameter/Type
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

4. Lithologic Log

Feet Below Surface

From	To	Description
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

5. Driller Information

Drilling Company: _____

Company Address: _____

City, State, Zip: _____

Driller's Signature: _____

Date: _____

Driller's Certification Number: _____

8. Site Sketch Map